

**Congress of the United States**  
**Washington, DC 20515**

March 8, 2010

The Honorable David R. Obey  
Chairman  
Subcommittee on Labor-HHS-Education  
House Appropriations Committee  
2358-8 Rayburn House Office Building  
Washington, DC 20515

The Honorable Todd Tiaht  
Ranking Member  
Subcommittee on Labor-HHS-Education  
House Appropriations Committee  
1016 Longworth House Office Building  
Washington, DC 20515

SUBJECT: FY2011 CDC Viral Hepatitis Prevention Program Funding

Dear Chairman Obey and Ranking Member Tiaht:

We write to respectfully request that you provide \$50 million for viral hepatitis prevention at the Centers for Disease Control and Prevention (CDC) in the FY2011 Labor-HHS-Education Appropriations bill. This funding would allow for the provision of core prevention services that include hepatitis B and C education, counseling, testing, referral to care, delivery of hepatitis A and B vaccines, and establishing a national surveillance system for chronic hepatitis B and C, which are currently not supported by the federal government. In FY2010, the Division of Viral Hepatitis (DVH) at CDC received \$19.3 million: the only dedicated federal funding to address viral hepatitis. This amount does not allow for the provision of core prevention services. We appreciate the Committee's past support for viral hepatitis prevention and strongly encourage you to increase the commitment this year.

Nearly 5.3 million Americans are infected with viral hepatitis – roughly six times the number of Americans with HIV – and most of them do not know it. Viral hepatitis causes at least 15,000 deaths each year and is a leading cause of liver cancer, one of the most lethal, expensive and fastest growing cancers in America. It is also a leading cause of death in Americans living with HIV - nearly 25 percent of HIV-positive Americans are also infected with hepatitis C and nearly 10 percent with hepatitis B. In 2007 alone, the CDC estimated that 43,000 Americans were newly infected with hepatitis B and 17,000 with hepatitis C.

An increased investment in viral hepatitis prevention at the CDC will lead to decreased health care costs for chronic viral hepatitis. The total cost of treatment of hepatitis B is approximately \$2.5 billion and hepatitis C costs are expected to increase from \$30 billion to over \$85 billion in 2024, as baby boomers continue to age into Medicare and are likely to develop complications from hepatitis C, requiring expensive medical interventions.

These epidemics are particularly alarming given rising incidence rates and high prevalence rates among disproportionately impacted racial and ethnic populations. It is estimated that one in ten Asian Americans are chronically infected with hepatitis B, especially those from high endemic countries (Asia and sub-Saharan Africa). African Americans are two to three times more likely to

be infected with hepatitis C than Caucasian Americans. Further, the baby boomer population currently accounts for two out of every three cases of chronic hepatitis C.

We urge you to provide \$50 million for the viral hepatitis prevention program at CDC in fiscal year 2011. Thank you for your attention to our concerns, and we look forward to working with you to advance programs for the prevention of these high-cost, chronic infectious diseases.

Sincerely,



Henry C. "Hank" Johnson  
Member of Congress



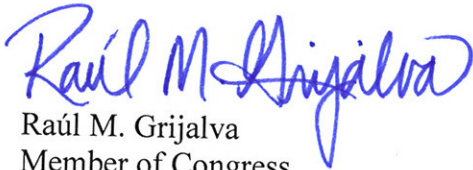
Leonard Lance  
Member of Congress



Judy Chu  
Member of Congress



Donna Christensen  
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Raúl M. Grijalva  
Member of Congress



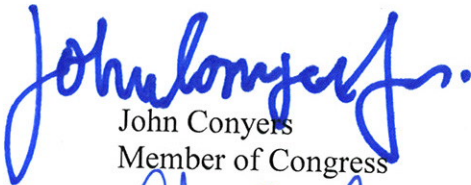
Edolphus "Ed" Towns  
Member of Congress



Steven Rothman  
Member of Congress



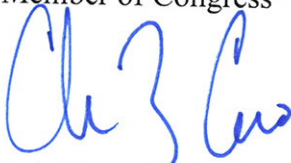
Donna F. Edwards  
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John Conyers  
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Danny K. Davis  
Member of Congress



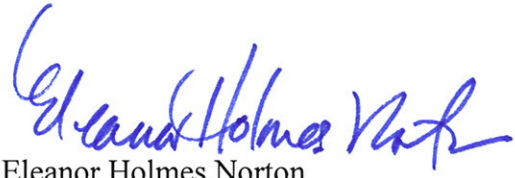
Anh "Joseph" Cao  
Member of Congress



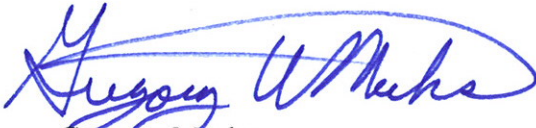
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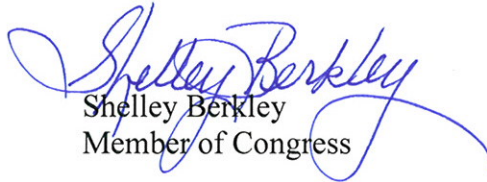
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Sheila Jackson Lee  
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Shelley Berkley  
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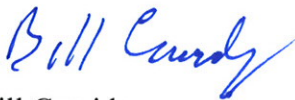
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David Wu  
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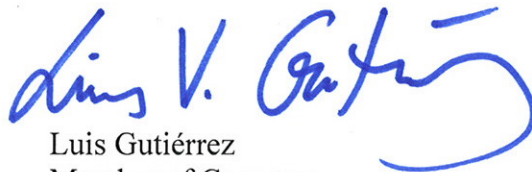
Laura Richardson  
Member of Congress



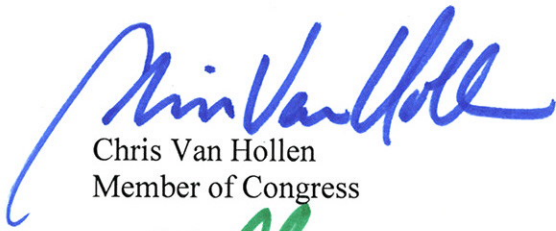
Bill Delahunt  
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Maxine Waters  
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Luis Gutiérrez  
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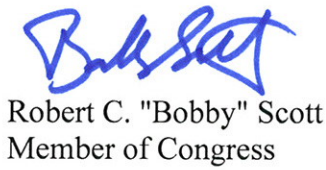
John Lewis  
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